

POSITION	INITIALS	15 NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		48	7/26/01
<b>FORMALITY REVIEW</b>	MH	920	08-27-01
<b>RESPONSE FORMALITY REVIEW</b>	CR	1109	10-11-01

**INDEX OF CLAIMS**

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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10-11-01  
6/27/01  
10-11-01

**BEST AVAILABLE COPY**